		Complete if Known								
FEE		Application Number								
TRANSMITTAL		Filing Date								·
Patent fees are subject to annual revision		First Named	, V2	Yair Rosenbaum						
Applicant claims small entity status. See 37 CFR 1.27		Examiner Name		<del>'   'a</del>	Tan Troserroduili					
TOTAL AMOUNT OF PAYMENT (\$) 790		Group Art Un	it							
METHOD OF PAYMENT (check all that apply)		Attorney Doc	ket No.	SC	0977EI					
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Check Credit card Money Order Other None					AL FEES	_				
X Motorola, Inc. Deposit Account			Large Small Entity Entity							
Motorola, Inc. Deposit Account Number 502117			Fee	Fee	Fee	Fee				
Deposit Account Name Motorola, Inc.			Code	(5)	Code	(\$)		Fee Description		
The Director Is authorized to: (check all that apply)  X Charge (sets) indicated below  Y Credit any companyments			1051	130	2051	65	Sur	charge - late filing fee or	r oath	
X Charge fee(s) indicated below X Credit any overpayments			1052	50	2052	25		charge - late Provisiona	filing	
X Charge any additional tee(s) during the pendency of this application			1053 1812	130 2520	1053	130		-English specification		
			1012	2320	1812	2520		filling a request for ex pa examination	rte	
Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.			1804	920*	1804	920°		uesting publication of SIR po miner action	ior to `	
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FEE CALCU	LATION		1251	110	2251	55		ension for reply within firs	st month	
			1252	410	2252	205		nsion for reply within second		
1. BASIC FILING FEE			1253 1254	930	2253	465		rsion for raptly within third m		
				1450	2254	725	Exter	raion for reply within fourth n	month	
Large Entity Small Entity			1255	1970	2255	985		nsion for reply within fifth	month .	
Fee Fee Fee			1401	320 320	2401 2402	160 160	Notic	e of Appeal		
Code (5) Code (5)	Feel	Paid '	1403	280	2403	140	Requ	g a brief in support of an sest for oral hearing ion to institute a public us		
1001 750 2001 375	Utility filing tee 750	٦	1451 1452	1510 110	1451 2452	1510	proce	eeding		
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SUB	TOTAL (1) (\$) 750	<del></del>	1460 1807	130 50	1460 1807	130 50		ons to the Commissione		
2. EXTRA CLAIM FEES	107.00		1806	180	1806	180		essing fee under 37 CFR ( hission of IDS	1.17(q)	
Previously (	Extra Fee trom		8021	40	8021	40		rding each patent assign		<u> </u>
	Claims below	Fee Paid				••		operty (times number of prop		40
Independent Claims 20 = 1	X 18 = X 84 =		1809	750	2809	375	Filing	a submission after final ion (37 CFR § 1.129(a))		
Multiple Dependent	280 =		1810	750	2810	375	For ea	ach additional invention tined (37 CFR § 1.129(b))		
Large Entity Small Entity Fee Fee Fee Fee			1801	750	2801	375	Reque	est for Continued Examin		
Code (\$) Code (\$)	Fee Description		1802	900	1802	900		CE) st for expedited exemina	ation	
1201 84 2201 42 Independ	n excess of 20 Sent claims in excess of 3	İ	Other fee (	(snorily)			of a	a design application		
1203 280 2203 140 Multiple dependent claim, il not paid			00.00	Japon. 37						
1204 84 2204 42 *Reissue	independent claims over orig	inal patent								
1205 18 2205 9 Reissue claims in excess of 20 and over original patent										
SUBTOTAL (2) (8)  *OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.  *For Reissues, see above			* Reduced by Basic Filing Fee paid SUBTOTAL (3) (\$) 40							
SUBMITTED BY			Complete (if applicable)							
Name (Print/Type) Susan C. Hill			Registrati	gistration No.   35,896   Telephone   (512) 998-6839						
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Signature — — — — — — — — — — — — — — — — — — —	un (_,	עניער				Dat	_	9/73	105	- 1